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**FOR OFFSHORE/OUT-OF-STATE OPERATORS and COMMERCIAL DISPOSAL FACILITIES ONLY**

**INSTRUCTIONS**

EP 2011 Form OR-1: Organization Report  
Registration Fee \$0.00

**WHO IS TO FILE FORM OR-1:** Each entity performing operations within the jurisdiction of the Office of Conservation must file annually. A separate Form OR-1, and appropriate fee (if applicable), must be filed for each type of operation.

**WHEN TO FILE FORM OR-1:** Form OR-1 must be filed and be approved prior to initial date of operation by any entity with whom the Office of Conservation has jurisdiction or must be filed when the organization name, contact person, officer and/or any address listed on approved Form OR-1 is being changed. Initial filing shall be valid for the first calendar year.

Form OR-1 must be re-filed annually by the date specified. The Office of Conservation will provide a renewal notice by mailing a blank Form OR-1. Update any changes by entering them in the proper areas: where no changes occur, enter the word "SAME". SIGN and DATE the OR-1 and return to the Office of Conservation in Baton Rouge by the date required.

**SPECIFIC ITEMS ON FORM OR-1:**

1. Check the proper block to show the purpose of filing.
2. Your permanent code number is assigned upon initial filing of your OR-1. If you change your organization name, a new number will be assigned, do not give your previously assigned OOC Code Number in this space (See No. 10).
3. Check proper block to show type of operation. **A separate Form OR-1 , and appropriate fee, must be filed for each type of operation.**

3a. Please indicate the Initial Date of Operation in Louisiana.

4. Check the appropriate plan of organization. Select one only.

5. **COMPANY'S FEDERAL TAX ID NUMBER MUST BE LISTED.** The information provided will be used solely for the administration and enforcement of the laws pertaining to the Office of Conservation.

6. This is the official name of your organization as carried on Office of Conservation records. **ADDRESS, (a) ALONG WITH CONTACT PERSON FOR ORGANIZATION CORRESPONDENCE AND (b) AN EMERGENCY CONTACT, PHONE NUMBER, ETC ARE REQUIRED PURSUANT TO R.S. 30:4B. ALL OF THIS INFORMATION MUST BE PROVIDED.**

6a. and 6b. **NAME AND ADDRESS INSTRUCTIONS:** Each name and address line is limited to 30 spaces in length. Each name is limited to one line while each address is limited to four lines. Use abbreviations where necessary to conform to these limits.

7. Address to which Production Audit reporting correspondence should be directed, give Contact Person , telephone number, fax number, and e-mail address.

8. List **ONLY** the **THREE** highest ranking officers of the organization and give their full legal name (**AGENTS NOT ACCEPTABLE**). Do not attach a listing of any others.

9. Complete Page 2 as an option of organization address for Field Compliance/Injection and Mining/Environmental Division Correspondence. Otherwise, such correspondence will be directed to the address provided at No. 6A. Each name and address line is limited to 30 spaces in length. Each name is limited to one line, while each address is limited to four lines. Use abbreviations where necessary to conform to these limits.

10. If you have changed your organization name, give the previous name of the organization , as well as the previously assigned OOC Code Number.

**IF YOU HAVE ANY QUESTIONS PLEASE CALL DARYL WILLIAMS AT (225) 342-7286.**

**RETURN TO:**  
**DEPARTMENT OF NATURAL RESOURCES**  
**OFFICE OF CONSERVATION**  
**ENVIRONMENTAL DIVISION - DARYL WILLIAMS**  
**P.O. BOX 94275**  
**BATON ROUGE, LA. 70804-9275**

Office of Conservation (OOC) Code Number: \_\_\_\_\_

Organization Name: \_\_\_\_\_

**(To be completed by Operators of Oil and Gas Wells and Oilfield Pits)**ADDRESS TO WHICH **COMPLIANCE CORRESPONDENCE** (Field, Form WH-1, Form Comp., Form Eng-16, Form P & A, Work Permit, Form AD, Directional Survey, Form DM 1-R, Form DT-1, etc) SHOULD BE DIRECTED:


CONTACT PERSON: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ / \_\_\_\_\_  
AREA CODE NUMBERFAX NUMBER: \_\_\_\_\_ / \_\_\_\_\_  
AREA CODE NUMBER

E-MAIL ADDRESS: \_\_\_\_\_

**(To be completed by Operators that possess a Class II, III and V Injection/Disposal Permit)**ADDRESS TO WHICH **INJECTION & MINING CORRESPONDENCE** SHOULD BE DIRECTED:


CONTACT PERSON: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ / \_\_\_\_\_  
AREA CODE NUMBERFAX NUMBER: \_\_\_\_\_ / \_\_\_\_\_  
AREA CODE NUMBER

E-MAIL ADDRESS: \_\_\_\_\_

**(To be completed by Operators that possess a Class II, III and V Injection/Disposal Permit)**ADDRESS TO WHICH **ENVIRONMENTAL DIVISION CORRESPONDENCE** SHOULD BE DIRECTED:


CONTACT PERSON: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ / \_\_\_\_\_  
AREA CODE NUMBERFAX NUMBER: \_\_\_\_\_ / \_\_\_\_\_  
AREA CODE NUMBER

E-MAIL ADDRESS: \_\_\_\_\_

**INSTRUCTIONS:**

This form is to be filed annually. Each name and address line is limited to 30 spaces in length. Each name is limited to one line while each address is limited to four lines. Use abbreviations where necessary to conform to these limits.